

Complete ALL areas as required. SIGN and RETURN by USPS mail, FAX, or HAND DELIVER to:

**Troy City Clerk**  
**500 W. Big Beaver Rd.**  
**Troy, MI 48084-5285**

Phone: 248.524.3316

Fax: 248.524.1770

Website: [www.troymi.gov/elections](http://www.troymi.gov/elections)

## APPLICATION FOR ABSENT VOTER'S BALLOT

☐ **AUGUST PRIMARY**  
**August 2, 2016**

☐ **NOVEMBER GENERAL**  
**November 8, 2016**

**IMPORTANT:**

**DO NOT FORWARD BY E-MAIL.** The voter's signature is *required* on the application to issue a ballot. Further instructions are on the reverse side of this application.

I am a United States Citizen and a qualified and registered elector in the City of Troy, County of Oakland, State of Michigan, I hereby apply for an official ballot, to be voted by me at the election requested on this application.

### APPLICANT REGISTRATION INFORMATION:

### DATE OF BIRTH

First Name

M.I.

Last Name

Street Address

Troy, MI

Zipcode

The reason for my request is (required):

- ☐ I am 60 years of age or older.
- ☐ I expect to be absent from the community in which I am registered for the entire time the polls are open on election day.
- ☐ I am physically unable to attend the polls without the assistance of another.
- ☐ I cannot attend the polls because of the tenets of my religion.
- ☐ I have been appointed an election precinct inspector in a precinct other than the precinct where I reside
- ☐ I cannot attend the polls because I am confined to jail awaiting arraignment or trial.

### CLERK'S USE ONLY

Election	8/2/2016	11/8/2016
Pct #		
Filed		
Ballot #		
Mailed		
Returned		
Clerk		

I certify that I am a United States citizen and that the statements in this absent voter ballot application are true.

**X**

Signature

Date

**WARNING:** You must be a United States citizen to vote. If you are not a United States citizen, you will not be issued an absent voter ballot. A person making a false statement in this absent voter ballot application is guilty of a misdemeanor. It is a violation of Michigan election law for a person other than those listed in the instructions to return, offer to return, agree to return, or solicit to return your absent voter ballot to the clerk. An assistant authorized by the clerk who receives absent voter ballot applications at a location other than the clerk's office must have credentials signed by the clerk. Ask to see his or her credentials before entrusting your application with a person claiming to have the clerk's authorization to return your application.

### COMPLETE **ONLY** IF YOU WANT YOUR BALLOT SENT TO A TEMPORARY ADDRESS:

**NOTE: Absentee ballots will not be forwarded by USPS.**

**SEND  
PRIMARY  
BALLOT TO**

**DATE LEAVING FOR  
TEMPORARY  
ADDRESS:**

**CONTACT INFO FOR  
QUESTIONS**

Email Address

**SEND  
GENERAL  
BALLOT TO**

**DATE LEAVING FOR  
TEMPORARY  
ADDRESS:**

Phone Numbers

## INSTRUCTIONS FOR APPLICANTS FOR ABSENTEE VOTER BALLOTS

- Step 1 After completely filling out the application, sign and date the application in the place designated. Your signature must appear on the application or you will not receive an absent voter ballot
- Step 2 Deliver the application by one of the following methods:
- a) Place the application in an envelope addressed to City of Troy – Elections – 500 W. Big Beaver Rd. – Troy, Michigan 48084 and deposit in the United States mail or with another public postal service, express mail service, parcel post service, or common carrier. Proper postage is required.
  - b) Deliver the application personally to the clerk's office, to the clerk, or to the clerk's authorized assistant.
  - c) In either (a) or (b), a member of the immediate family of the voter including a father-in-law, mother-in-law, brother-in-law, sister-in-law, son-in-law, daughter-in-law, grandparent, or grandchild of the person residing in the voter's household may mail or deliver the application to the clerk for the applicant.
  - d) If an applicant cannot return the application in any of the above methods, the applicant may select any registered elector to return the application. The person returning the application must sign and return the certificate at the bottom of this application.

### Certificate of Authorized Registered Elector Returning Absent Voter Ballot Application:

I certify that my name is \_\_\_\_\_, date of birth is \_\_\_\_\_  
/ / and my address is \_\_\_\_\_;  
that I am delivering the absent voter ballot application of \_\_\_\_\_  
at his or her request; that I did not solicit or request to return the application; that I have not made any  
markings on the application; that I have not altered the application in any way; that I have not  
influenced the application; and that I am aware that a false statement in this certificate is a violation of  
Michigan election law.

**X**

Signature of person assisting the voter

Date

**Complete only  
if assisting a  
voter with  
return of the  
application**

### FOR YOUR CONVENIENCE

**24 HOUR DRIVE-UP DROP BOX LOCATED ON WEST SIDE OF CITY HALL  
24 HOUR WALK-UP DROP BOX LOCATED ON EAST SIDE OF CITY HALL**